Form DR-2: Disclosure Summary Page

DR-2

Committee Name

Committee to Elect Helen Miller

Candidate Name: Helen N Miller

Committee ID#: 1445

Status: Amended

Committee Type: State House

Report Year: 2002

Treasurer: JoDene Rial

Treas. Primary Phone: (515) 576-4715

Chairperson:

Chair. Primary Phone: (null

County: Webster

District: 49

Political Party: Democratic

Statutory Due Date	5/31/2002
Adjusted Due Date	
Filed Date	5/28/2002
Received Date	5/24/2002
Amendment Date	12/19/2003

Statement of Cash On Hand

Cash on Hand at Start of Period	\$3,489.31
Schedule A: Cash Contributions Total	\$2,055.00
Schedule F1: Loans Received Total	\$0.00
Schedule H1: Campaign Property Sales	\$0.00
Sub-Total	\$5,544.31
Schedule B: Expenditure Total	\$0.00
Schedule F2: Cash Loan Repayments	\$0.00
Cash on Hand at End of Period	\$5,544.31

Additional Assets and Liabilities

Loans in Place at Start of Period	\$0.00
Schedule D: Unpaid Bills	\$0.00
Schedule E: In-Kind Contributions	\$0.00
Schedule F2: Forgiven Loans	\$0.00
Schedule F2: Outstanding Loans	\$0.00
Schedule G: Consultant Breakdown	N
Schedule H2: Campaign Property Value	\$0.00

Batch processed using the IECDB Web Reporting System on 12/20/2003 01:16:28

Schedule A: Contributions -- Money Taken In

Sch-A

Committee N		Committee ID 1445		Statutory Du	e Date	5/31/20	002
Committee	to Elect He	len Miller		Adjusted Du	e Date		
				Filed Date		5/28/20	02
Chahua	Comm	nittoo Tuno Ctata Harra		Amended Da	ate	12/16/2	:003
Status Ame	naea Comir	nittee Type State House		Received Da	te	5/24/20	02
Contribution Date	Contribution Committee ID	Name and Address of Contributor	Rel Car	ationship To ididate	Contri Amour		Fund- Raiser
5/15/2002		Bumbary-Langston, Inga	Nor	ne	:	\$100.00	
		3301 Kingman Blvd			İ		
	Check #	!					
	6766	Des Moines, IA 50311	1				:
5/15/2002		Carter, Linda	Non	ie		\$50.00	
		3141 SW 38th PI					
	Check #						
	3527	Des Moines, IA 50321					
5/15/2002		Miller, Edward	Spo	use	\$1	,500.00	!
		1936 15th Ave N.					
	Check #	1990 ISHI AVE IV.					i
	2289	Fort Dodge, IA 50501					
						-	
5/15/2002		Price, Sondra	Non	е		\$50.00	
		2018 8th Ave N		!		i	
	Check #	2010 041710011					
		Fort Dodge, IA 50501				:	
5/15/2002		Stanek, Nancy	Non	е	\$	3100.00	
		448 Loomis Ave.	İ				
	Check #						
		Fort Dodge, IA 50501	İ				
!							
5/15/2002	ļ	Unitemized	N/A			\$10.00	
:	į	N/A					
		N/A				!	
	'	N/A, N/A N/A					

Batch processed using the IECDB Web Reporting System on 12/17/2003 01:15:05

Page 1 of 3

Committee N		Committee ID 1445		Statutory Du	ıe Date	5/31/20	02
Committee	to Elect He	len Miller		Adjusted Du	e Date		
				Filed Date		5/28/20	02
01-1		mittee Torre Otesta Have		Amended Da	ate	12/16/2	003
Status Ame	nded Comi	mittee Type State House		Received Da	ite	5/24/20	02
Contribution Date	Contribution Committee ID	Name and Address of Contributor		ationship To ndidate	Contri Amour		Fund- Raiser
5/15/2002		Unitemized	N/A			\$10.00	
	!	N/A					
	Check #	N/A	!				
	N/A	N/A, N/A N/A					
5/15/2002		Unitemized	N/A			\$20.00	
		N/A					
	Check #	N/A					
	N/A	N/A, N/A N/A					
5/17/2002		Anderson, Ronald	Non	e		\$50.00	
	Check #	705 Muirfield Circle			ı		
	5709	Fort Washington, MD 20744					
5/17/2002		Player, Jewel	Non	e		\$35.00	
		2114 Catherine Fran Dr.					
	Check #						
	7140	Fort Dodge, IA 50501					
5/17/2002		Unitemized	N/A	,		\$20.00	
		N/A					
	Check #	N/A	!				
	N/A	N/A, N/A N/A					
5/21/2002		Stiles, Berneta	Non	e		\$50.00	
į		1000 N 04th Ct	İ				
	Check #	1202 N. 24th St.		:			
		Fort Dodge, IA 50501		:			
	0110	FOIL Douge, IA 30301	İ				

Batch processed using the IECDB Web Reporting System on 12/17/2003 01:15:05

Page 2 of 3

ame	Committee ID 1445		Statutory Du	ie Date	5/31/20	02
Committee to Elect Helen Miller			Adjusted Du	e Date		
			Filed Date		5/28/20	02
Comm	sittee Type Ctate Haves		Amended Da	ate	12/16/2	003
nded Comi	Tittlee Type State nouse		Received Da	ite	5/24/20	02
Contribution Committee ID	Name and Address of Contributor					Fund- Raiser
	Escobedo, Shelly	Non	ie		\$35.00	
	3266 5th Ave N					İ
Check #						
4970	Fort Dodge, IA 50501					
i 	Unitemized	N/A			\$25.00	
	N/A					
Check #	N/A	!				
N/A	N/A, N/A N/A					
	Contributions Total	N/A			\$0.00	
	N/A					
	N/A					
	N/A, IA 222222222					
	Total Regular Contributions			\$2	,055.00	
	Total Fundraiser Contributions					
	check #	contribution Committee Type State House Contribution Committee ID Rescobedo, Shelly 3266 5th Ave N Check # 4970 Fort Dodge, IA 50501 Unitemized N/A N/A N/A N/A N/A N/A N/A N/	contribution Committee Type State House Contribution Committee ID Name and Address of Contributor Car	Adjusted Du Filed Date Amended Date Amended Date Amended Date Received Date Amended Date Received Date Amended Date Received Date Received Date Amended Date Received Date	Adjusted Due Date Filed Date Amended Date Received Date Contribution Committee ID Name and Address of Contributor Committee ID Escobedo, Shelly 3266 5th Ave N Check # 4970 Fort Dodge, IA 50501 Unitemized N/A N/A N/A N/A N/A N/A N/A N/	Adjusted Due Date Filed Date Committee Type State House Contribution Committee ID Received Date Escobedo, Shelly 3266 5th Ave N Check # 4970 Fort Dodge, IA 50501 Unitemized N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A

Grand Total All Contributions

\$2,055.00

• FOR INSTRUCTIONS, SEE BACK OF FORM DISCLOSURE SUMMARY PAGE	MAY 2 8 200	2	FORM DR-2	DISCLOSURE
COMMITTEE NAME (Must be same as on Statement of Organizate Committee to elect the len	ion) Miller		Rev. 01/2001)	REPORT
IMPORTANT: Indicate type of committee you are reporting for:		f c	Comm. #	
(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) C (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central (8) Support State of Candidates		A	udited	
CANDIDATE COMMITTEES ONLY:				
Candidate Name Po	Democrat	_		
Office Sought State Representative	strict (if Senate or House	e) -		
Johne Rial	515 576	4715	-	5/22/02
SIGNATURE OF TREASURER (or person filing this report)	TELEPHONE		DATE S	IGNED
Routine Penalties Due For Late File	ed Reports Range	from \$2	0 to \$800	
SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOIL I AM FILING A Pre Primary Supplemental Report REF (report date)	PORT FOR AN/A (1) ELI		(2)NON-ELECT	TION YEAR.
CHECK IF AMENDMENT TO REPORT DATED			mmittees, enter D	
Check if this is final (termination) report and attach Notice of Dissolution (You must continue to file reports until a Notice of Dissolution)		County & which Ele		es, enter County in
STATEMENT OF	CASH ON HAND			
CASH ON HAND at the beginning of the reporting period. (This is to by the committee. This amount MUST be the same as the of the last reporting period, or must be zero if this is first re-	and the same became and the same		3464	1.3/
ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) Schedule F: Loans Received total (Attach Schedule F)	(*also see in-kind below	/)	2080	
Contradict : Loand (Cooked Chair (Machine Contradict)				
Schedule H: Total Sales of Campaign Property (Attach Sc		••••••		
(Schedule H applies to Candidates' Committee		rai ¢	ر ن سرسو	2 7 1
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	305-101	ΛΕΨ	5549	1.21
Schedule B: Expenditures total (Attach Schedule B) (**also	o see debts and loans b	elow)		
Schedule F: Loan Repayments total (Attach Schedule F)				
				31
CASH ON HAND at the end of this reporting period (if final report, be zero) (Attach DR-3)	•••••	\$	5549	
**UNPAID BILLS (From Schedule D - Attach Schedule D)	·			
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E				
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)				
CANDIDATE COMMITTEES ONLY:		,		

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Committee to elect Helen Miller	COMMITTEE NAME	(Must be same as or	Statement of Organization)	······································
(ammittee to spect they a Willer	()			

SCHEDULE						
A (Rev. 06/97)	MONETARY RECEIPTS					
CHECK THIS BOX IF AMENDING FORM						

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
	NUMBER				INCOME
[ID#	Edward A Miller	i	\$	
05-15-02	CK# 2289	Fort Dodge IA 50501	husband	150000	
	ID#	Bernita + Scott Stiles			
05-21-02	CK# 6118	1202 N 24 TH St. Fort Dodge IA 60501		3000	
	ID# 6-26-0	Dennis / Patricia Milefchik	•		
05-17-02	CK# 6260	Dennis / Patricia Milefchik 1628 N 23rd St Fort Dodge IA 50501		2000	
	ID#	Ronald a Beverly Anderson			
05-17-02	ck# 5709	705 Muirfield Circle Ft Washington Md 2074		50	
	ID#	Jewel and Dewitt Player			
05-17-0x	ck# 7140	2114 Catherine Fran Dr. Acco Keek Md 20607		3500	i i
	ID#	Lois Dencklau			
	CV#	2021 N147 et #4	,		
05-22-02	CK# 4832	Fort Dodge IA 50501		2500	i
	ID#	Shelly Escobelo			
05-22-02	CK# 4970	3266 5 M Ave N		35	
	ID#	R Thomas + Sondre Price			
05-15-02	CK# 8592	5018 8th Ave N	•	50 OD	
	1D#	Fort Dodge IA 50501			
J 1	,	Inga Dumbary Langstom 3301 Kingman Ave		/1 1 /R	
05-15-02	6766	Des Moines IA 50311		10000	
	ID#	Nancy Stanek			
05-15-02	ck# 1573	Fort Dodge IA 50581		10000	!
		7	SUB-TOTAL	19100	

TOTAL (if last page of this schedule)

Page / of 2

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

For Instructions, See Back of Form

CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME	Must be same as or	Statement of Orga	nization)	
Committee	to elect	Helen	Miller	

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS			
CHECK THIS BOX IF AMENDING FORM				

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
05-15-02	2017/	Des Moines IA 50321		\$ 5000	
05-15-02	1D# 0 CK# 3422 +351/1	Frances Hawthorne 1223 10 m St Des Mounes IA 50321		5000	
05-15-02	CK# 3422	Joe Nolte 2637 M Ave MW Cedar Rapids IA 52405		10 00	
05-15-02	ID# CK# 5879	Lillian Graham 134 5 Franklin Aue Ames IA 50014		1000	
	ID# CK#				
	ID# CK#				
	ID# CK#			·	
	ID# CK#				
	ID# CK#	·			
	ID# CK#				

SUB-TOTAL

TOTAL (if last page of this schedule)

\$120 \$2085°

Page ______ of ______

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.